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NOTES FROM THE MEDICAL PRESS



IN CHARGE OF

ELISABETH ROBINSON SCOVIL

DRAUGHTS AND COLD.—The *Medical Record*, quoting from the *British Medical Journal*, says: R. C. Macfie comes to the conclusion that draughts do occasionally play an auxiliary part in the production of colds, but that they are easily deprived of their dangers, and should be favored rather than feared. To endeavor to escape colds by avoiding all draughts must always be futile and foolish policy, and will not only defeat its own aim by fostering bacteria and by promoting vasomotor lethargy and incompetence, but will lead to deficient vigor through interference with skin reflexes, which play an important part in the respiratory and circulatory functions. When we wish to excite the respiratory centre of the newborn babe we appeal to its skin reflexes, and in cases of night sweats a breeze on the skin seems to give tone to the whole vasomotor system. The skin is certainly meant to be exposed to moving air currents and to vicissitudes of heat and cold; it is surely meant to have a blood supply that ebbs and flows according to the thermal needs of the tissues; it is surely meant to perspire and to transpire, and accordingly to shut it off from wind currents and to enclose it in a motionless layer of moist air is to depart very far from the ways of physiological righteousness. The bracing effects of dry air and of seaside breezes are largely due to their stimulating effects on the excretory and reflex functions of the skin, and the man who endeavors to avoid colds by avoiding all draughts will not only catch more than his share of colds, but will possess much less than his share of health and vigor.

PARENTAL ALCOHOLISM AND OFFSPRING.—The *Medical Record*, quoting from a contemporary journal, says: M. D. Sturge and Sir Victor Horsely severely arraign the conclusions arrived at by E. M. Elderton and K. Pearson in the consideration of the wage-earning capacity of sober and drunken workmen respectively, and of the effects on offspring of alcoholism in their parents.

IS CANCER CONTAGIOUS?—White reports, in the *Medical Record*, the history of five cancer patients, four of whom have died, three in

one house and two in the other, all either related by blood or living in close association with one another in the capacity of husband and wife. The five victims have all been infected within the last five years.

CLEANING MACHINERY WOUNDS.—L. Sexton, in *The Virginia Medical Semi-Monthly*, says: In removing the paint, dirt, and grease incident to machinery accidents, spirits of turpentine makes one of the best cleansing and antiseptic agents for removing grease and oils that are so ground in as to be almost impervious to soap and water. There has recently come into vogue the application of diluted tincture of iodine to just such injuries as above alluded to, with results as good in many instances as the old plan of scrubbing with green soap, manipulating the parts and trying to get rid of materials that are practically ingrained into the tissues. In fact, the extensive scrubbing of very painful and lacerated wounds and injury is giving away to less heroic washing and brushing at the first-aid treatment.

A CASE OF FATAL SODIUM CHLORIDE POISONING.—*The American Journal of Surgery* quotes this case reported in a contemporary journal:

A young woman was operated upon in the internal for chronic appendicitis. The operation was quickly done and the patient left the table with a normal pulse, temperature, and respiration. A rectal injection of one pint physiological salt solution was ordered every hour for three doses. One hour after the first enema, the patient became restless, nervous, and complained of thirst. At the second dose, the symptoms were more exaggerated and she begged continuously for the bed pan. A third enema was given, after which the patient became unconscious; the pulse was small, 120; the temperature was 101° F. The temperature rapidly rose to 109° F., the respirations became very rapid, shallow, and difficult, and the patient died eight hours after operation. A few minutes before death about one quart of blood-stained gelatinous material was discharged from the intestine. Respiration ceased five minutes before cardiac action. The urine showed no albumen. No autopsy was permitted. Several days afterward it was discovered that the nurse had given the enemata from a stock bottle containing saturated sodium chloride solution. The patient had thus received nearly nine ounces of sodium chloride.

Brooks found that the symptoms in rabbits to whom saturated sodium chloride had been fed (by stomach tube) corresponded exactly to those of the patient whom he had reported.

TREATMENT OF PNEUMONIA WITH CREOSOTE INHALATIONS.—Dr. Beverly Robinson, in the *New York Medical Journal*, says: One of the most important things to be constantly borne in mind in the prophylaxis and treatment of pneumonia is, in my judgment, the proper and efficient use of beechwood creosote by means of inhalation. This I have dwelt upon time and time again, and latterly in the last April issue of *American Medicine*. To those who are willing to believe the experience and convictions resulting from life long service, I would earnestly refer them to that article on the treatment of pneumonia. I here reaffirm, there is absolutely nothing so simple, so effective, so harmless in the prophylactic and curative treatment of croupous pneumonia and also catarrhal pneumonia, as inhalations of warm creosote vapors from the ordinary croup kettle filled with water and allowed to simmer over a lamp burner, stove, what not, in a more or less continuous manner during the inception and continuance of pneumonia. Further, I venture to affirm, no nurse or attendant will take it from the patient thus treated.

ABNORMAL CASES OF DIPHTHERIA.—The *Medical Record*, quoting from a Cuban medical journal, says: R. García Rijo, after describing 15 cases of abnormal diphtheria, gives the following conclusions: 1. The malignancy of the disease is not always directly related to the production of pseudo-membranes. 2. The serum may fail if applied late. 3. A severe toxemia may occur in the first three days. 4. Many cases of apparently benign inflammation of the throat react favorably after serum injection. 5. The serum is so harmless that it should be applied freely as a preventive even in the newly born. 6. The preventive application of serum allows a mother to nurse a diphtheritic child at the same time as a healthy one previously immunized.

REMOVAL OF ADHESIVE PLASTER.—E. J. G. Beardsley, *Journal of the American Medical Association*, mentions the difficulty often experienced and the pain and discomfort to the patient, in the removal of adhesive plaster, especially over hairy parts. He accidentally discovered that oil of wintergreen, applied directly to the plaster, spreads throughout the adhesive material and causes it to come away readily and painlessly. When extensive areas are to be removed the application of an ointment of adepslanæ hydrosus, with 10 per cent. of oil of wintergreen incorporated, is even more useful than the oil alone.